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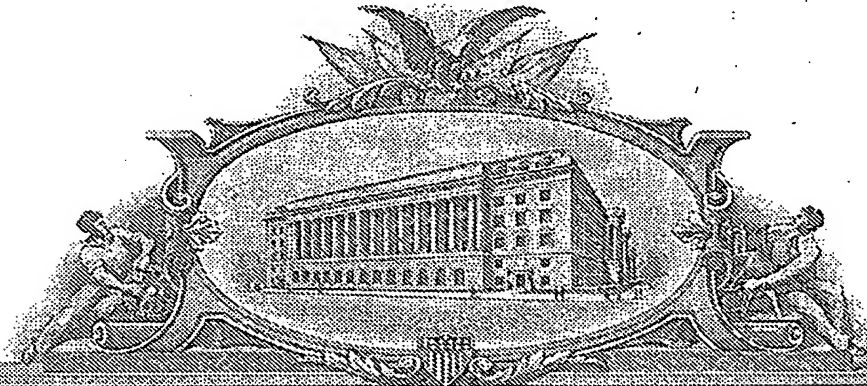
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**PROVISIONAL APPLICATION FOR PATENT COVER SHEET**

This is a request for filing a PROVISIONAL APPLICATION FOR PATENT under 37 CFR 1.53(c).

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TITLE OF THE INVENTION (500 characters max)					
AAV MICROUTROPHIN AND METHODS OF USE THEREOF					
Direct all correspondence to: CORRESPONDENCE ADDRESS					
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The invention was made by an agency of the United States Government or under a contract with an agency of the United States Government.					
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Respectfully submitted,

  
Lisa Burgin Conte, Reg. No. 52,470Date: January 23, 2004

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USE ONLY FOR FILING A PROVISIONAL APPLICATION FOR PATENT

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## AAV MICROUTROPHIN AND METHODS OF USE THEREOF

### Description of the Technology:

This document discloses the construction and intended use of a microutrophin coding sequence in the treatment of the most common X-linked lethal disease in man. The goal is to use this new construction in the context of recombinant AAV delivered to skeletal and ultimately cardiac muscle as outlined in previous technology disclosures.

Duchenne Muscular Dystrophy (DMD) is caused by a deficiency of the muscle cytoskeletal protein known as dystrophin (Hoffman, Brown et al. 1987; Hoffman, Fischbeck et al. 1988). Dystrophin is a member of the spectrin superfamily of proteins and as such is distantly related to spectrin and alpha-actinin (Koenig, Monaco et al. 1988). Dystrophin is most closely related to the protein utrophin (Tinsley, Blake et al. 1992). The genes for these two proteins have nearly identical intron/exon structures, and the proteins are 50+% homologous at the amino acid level. Dystrophin is expressed throughout the entire length of the skeletal muscle fiber while utrophin is normally expressed only at the neuromuscular junction. Most cases of DMD result from sporadic deletions of the X chromosomal dystrophin gene (Koenig, Beggs et al. 1989). The destruction of the dystrophin open reading frame by these mutations suggests that therapies that genetically reconstitute dystrophin expression will elicit a cellular immune response against the fibers in which the protein is synthesized.

In the years following the initial discovery of utrophin, the technologies for targeted gene ablation in mice facilitated a formal genetic analysis of gene complementation. In the transgenic mouse in which the expression of utrophin is dictated by a muscle-specific promoter, utrophin can complement the physiological role of dystrophin (Tinsley, Potter et al. 1996; Tinsley, Deconinck et al. 1998). This has prompted a multi-million dollar research effort to find pharmacological means of upregulating the expression of utrophin in the muscle of patients with DMD (Burton, Tinsley et al. 1999; Perkins, Burton et al. 2001).

Our strategy is different: somatic transfer of a micro-utrophin encoding DNA sequence under the control of a muscle-specific promoter (Stedman 2001). Recently published studies from several groups have demonstrated the utility of AAV-sized microdystrophin cassettes for reversing the pathology of dystrophin deficiency in

mice(Wang, Li et al. 2000; Harper, Hauser et al. 2002). Building on this advance, we have constructed a microtrophin cassette for use in probing both the functional restoration of dystrophin and the immune response. Our preferred animal model for these studies is the German Short Haired Pointer dog, because of its complete deletion of the dystrophin coding sequence(Schatzberg, Olby et al. 1999). All other "dystrophin-deficient" animal models described to date derive from point mutations, with the end result that the immune systems in these animals are predicted to develop tolerance to the peptide encoded by the remainder of the dystrophin open reading frame(Schatzberg, Anderson et al. 1998; Lu, Morris et al. 2000). In the GSHP dog model we will be able to study in detail the immune response to recombinant canine dystrophin and utrophin, when these proteins are produced from somatically delivered AAV vectors. On completion of these studies we will have answered essential questions about the relative safety and efficacy of the two methods for treating DMD by somatic gene transfer.

Sequence 1  
Microtrophin Nucleotide Sequence

ATCGATCCACCATGGCCAAAGTATGGAGAACATGAAGCCAGTCCTGATAATGGGCAGAACGAATTTCAGTGACATCATTTAA  
GTCCAGATCTGATGAACACAATGACGTGCAGAGAAACCTTTACCAAAATGGATCAATGCGCGATTTCCTCAAGAGTGGAA  
AAACCACCCATCAATGATATGTTCCACAGACCTCAAAGATGGAAGGAAGCTCCTGGATCTTCTGGAGGCCCTCACAGGAA  
CATCACTGCCAAAGGAACGTGGTTCCACAAGGGTACATGCTTTAAATAATGTCAACAGAGTGTCTGCAGGTTTTGCATCA  
GAATAATGTGGATTAGTGAATATAGGAGGAACAGACATTGTAGATGGAAATCACAACTGACTTTGGGATTACTTTGG  
AGCATCATTTTGCAGTGGCAGGTAAAGATGTCTAGAAAGATGTCTATGTCAGACCTGCAGCAGACAAACAGTGAGAAGA  
TCCCTACTGAGCTGGGTGCGCCAGTCTACTAGGCCGTACAGCCAGGTCAACGTCTCACTTCACCACCAGCTGGACAGA  
TGGACTGGCCCTTAATGCTGTGCTGCACCGACATAAACCTGATCTCTTCAGCTGGGATAGAGTTGTCAAATGTCCCCA  
ATTGAGAGACTTGAACATGCCCTTCAGCAAAGCTCAAACCTATTGTTGGGAATTGAAAAGCTGTAAATCTGAAAGATGTTG  
CCGTTCAACTTCCTGACAAGAAATCCATAATTATGATTTAACATCTTTGTTTGGAGGTGCTTCTCAGCAAGTCACTCT  
AGATGCCATCCGTGAAGTAGAGACACTCCCAAGGAAATATAAGAAAGAAATGTGAAGAAAGAGAGATTAGTATACAGAGC  
TCAGCGCCAGAGGAGGAGCATGAGTGTCCCGAGCTGAAAACCCCCAGCACTGTCACTGAAGTTGACACGGATCTGGACA  
GCTATCAGATAGCACTGGAGGAAGTGTGACCTGGTTGCTTTCTGCGAGGACACTTTCAGGAGCAGGATGACATTTCT  
TGATGATGTAGAAGAAAGTCAAAGAGCAGTTTACTACCCATGAAGCTTTATGATGGAGCTGACAGCGCACCCAGAGCAGT  
GTGGGCAGTGTCTGTCAGGCAGGAAACAGCTGATAACGCAAGGAACCTCTGTCAGATGAGGAGGAATTTGAAATTCAGG  
AACAAATGACCCCTGCTAAATGCTAGATGGGAGGCACTCAGGGTGGATAGTATGAACAGACAGTCCCGGCTGCATGATGT  
GTTGATGGAACACTACAAAAGAGCAGTTGCAACAGCTCTCTGCTGGTTAAACACTCACAGAAGAACGCATTTCAGAAGATG  
GAAACCTGCCCCCTGGATGATGATTTAAATCCCTACAAAAGCTACTAGAAGATCATAAACGTTTGCAAAATGATCTTG  
AGGCGGAACAGGTGAAGGTAAATTCCTAACACACATGGTGGTGAATTTGTTGATGAAAACAGTGGTGGAGTGGCCACTGC  
TGTTCTGGAAGATCAGTTACAGAAACTTGGTGAACGCTGACAGCAGTGTGCGCTTGGACAGAGGAACGTTGGAGTAGG  
CTACAAGAAATTAATATATTGTTGGCAGGAATTATTAGAAGAACAGTGTCTGTTGAAAGCTTGGCTAACTGAAAAGAGAG  
AGGCGTTAAATAAGAGTCCAGACGAGCAACTTCAAAGACCAAAGGAACCTAAGTGTACAGCATCCGACGATTGGCTATTTT  
GAAGGAAGACATGGAATGAAACGTTCAGGCATTGGATCAGCTAAGTGAGATTGGCCAGGATGTGGGTCATTAATGATGAT  
AATCCCAAGGCATCTAAGAAGATCAACAGTGACTCAGAGGAACCTAAGTGTACAGATGGGATTCTTTGGTTTCAGAGACTAG  
AAGATTCCTCTAACCCAGGTGACTCAGGCTGTGGCAAGCTGGGGATGTCCCAAAATTCCTCAGAAAGATCTTCTGGAGAC  
TGTTGCTAAGAGAACCAAGTAACTACAAAAGGTCTAAGCAAGAACTGCCTCCTCCTCCTCCCCAAAGAGAGACAG  
ATTCTGTGTCAGCTGGAGAAGCTCAGAGACCTGCAGGGAGCCATGGATGACCTGGATGTTGACATGAAGGAGGCGGAGG  
CTGTGAGGAATGGCTGGAAGCCTGTGGGAGACTTACTTATCGACTCACTGCAGGATCACATTGAAAAAACCATGGCATT  
TAGAGAAGAAATTGCACCAATCAACCTAAAAGTTAAACAGTGAATGATTTATCCAGTCAGCTGTCTCCACTTGACCTG  
CATCCATCTCTAAGATGTCTCGCCAGCTAGATGACCTTAATATGCGATGGAACCTTCTGCAGGTTTCTGTGGATGATC  
GCCTTAAACAGCTTCAGGAAGCCCATAGAGATTTTGGGCCATCCTCTCAGCATTTTCTTTCTACTTCAGTCCAGCTGCC  
ATGGCAAAGATCCATTTACATAATAAGTGGCCCTATTACATCAACCATCAAACACAGACAACCTTGTGGGACCGTCCCT  
AAAATGACTGAACCTTTCAATCTCTTGTGACCTGAATAATGTACGTTTCTCTGCTACCGTACAGCCATCAAATCC  
GAAGACTACAAAAGCACTGTGTTTGGATCTCTTAGAGTTGAATACAACAAATGAAGTTTTCAAGCAGCACAACCTGAA  
CCAAATGATCAGCTTCTTAGCGTTCCAGATGTATCACTGTCTGACAACTTATGATGGTCTTGAACAAATGAT  
AAGGATCTGGTCAACGTTCCACTCTGTGTGGATATGTGTCTCACTGGTTGCTCAATGTGTATGACACGGGTGCAACTG  
GAAAAATAAGAGTGCAGAGTCTGAAGATTGGATTGATGTCTCTCTCCAAAGGTCTCTTAGAAGAAAAATACAGATATCT  
CTTTAAGGAGGTGGCAGGTCCGACAGAAATGTGTGACCAAGGAGCAGCTTGGCCTGTTACTTTCATGATGCCATCCAGATC  
CCTCGGCAGCTGGGGGAAGTAGCAGCTTTTGGGGGAGTAATATTGAACCCAGTGTTCGCAGCTGCTTCCAACAGAATA  
ACAATAAGCCAGAGATAAGCGTAAAGATTTTATAGATTGATGCGTCTGGAACCAAGTCCATGGTTTGGCTGCCAGT  
TTTACACCGAGTGGCTGCAGCTGAGACTGCAAAGCATCAAGCTAAATGCAACATCTGTAAAGAAATGTCCAATAGTTGGG  
TTCAGGTATAGAAGCCTAAAGCATTTTAACTATGATGTCTGCCAGAGTTGCTTTTTTTCGGGTGCAACGGCRAAAGGTC  
ACAAATTACATTACCAATGGTGGAAATATTGTATACCTACAACATCTGGGAAGATGTACGAGACTTCACAAAGGTGCT  
GAAGAATAAGTTGAGATCAAAGAAATACTTTGCCRAACATCCTCGGCTTGGCTACCTGCCTGTCCAGACAGTACTTGAA  
GGTGACAACTTAGAGACTTGAAAACCTCGAG

Sequence 2  
Microtrophin Peptide Sequence

MAKYGEHEASPDNGQNEFSDIKSRSDHEHNDVQKKTFTKWINARFSKSGKPPINDMFTDL  
KDGRKLLDLLEGLTGTSLPKERGSTRVHALNNVNRVLQVLHQNNVDLVNIGGTDIVDGNH  
KLTGLLWSHLHWQVKDVMKDVMSDLQQTNSBKILLSWVRQSTRPYSQVNVNFTTSWT  
DGLAFNAVLHRHKPDLFSWDRVVKMSPIERLEHAFSKAQTYLGIEKLLDPEDVAVQLPDK  
KSIIMYLTSLFEVLPQQVTLDAREVETLPRKYKKECEGEISIQSSAPHEEHECPGAET  
PSTVTEVDTDLSYQIALEEVLTWLLSABDTFQEQQDDISDDVEEVKEQFTTHEAFMMBELT  
AHQSSVGSVLQAGNQLITQGTLSDEBEFEIQBQMTLLNARWEALRVDSMNRQSRLHDVLM  
ELQKKQLQQLSAWLTLTTEERIQKMETCPLDDDLKSLQKLLDHKRLQNDLEAEQVKVNSL  
THMVVVDENSSESATAVLEDQLQKLGERWTA VCRWTEERWSRLQHINILWQELLEEQCL  
LKAWLTEKEEALNKVQTSNFKDQKELSVSIRRLAILKEDMEMKRQALDQLSEIGQDVGQL  
VDNPKASKKINSDEBELTQRWDSLVQRLEDSSNQVTQAVAKLGMSQIPQKDLETVRIRE  
QVTIKRSKQELPPPPPPKKRQIPVDLEKLRDLQGAMDDLDVDMKEABAVRNGWKPVGDLL  
IDSLQDHIBKTMAFREEIAPINLKVKTVNDLSSQLSPDLHPSLKMSRQLDDLNMWRKLL  
QVSVDRLKQLQBAHRDFGPSSQHFLSTSVQLPWQRSISHNKVPYYINHQTQTTCDWRPK  
MTLQSLADLNNVRFSAYRTAIKIRRLQKALCLDLLELNTTNBVFQKHLNQNDQLLSV  
PDVINCLTTTYDGLEQMHKDLVNVPLCVDMLNWLNVYDTGRTGKIRVQSLKIGLMSLS  
KGLLEEKYRYLFKEVAGPTMCDQRQLGLLHDAIQPRQLGEVAAFGGSNIEPSVRSCF  
QQNNNKPEISVKDFIDWMRLEPQSMVWLPVLHRVAAAETA KHQAKCNICKECPVGFYR  
SLKHFNVDVCQSCFFSGRTAKGHLHYFMVEYCIPTTSGEDVRDFTKVLKNKFRSKKYFA  
KHPRLGYPVQTVLEGDNLET

**We Claim:**

1. A microtrophin cassette for treatment of Duchenne Muscular Dystrophy (DMD) by somatic gene transfer.
2. A method of using the microtrophin cassette of claim 1 for restoration of dystrophin.
3. A method of using the microtrophin cassette of claim 1 to generate an immune response.
4. A method of treating dystrophin deficiency by somatic gene transfer.
5. The nucleotide sequence embodied in sequence 1 that encodes a microtrophin molecule, wherein the microtrophin molecule is homologous to the human dystrophin homolog utrophin.
6. A microtrophin molecule embodied in the polypeptide sequence of sequence 2, wherein the microtrophin molecule is homologous to the human dystrophin protein homolog utrophin.
7. A method of treatment using the nucleotide sequence of claim 5 wherein the nucleotide sequence is delivered to human cells by one or more gene vectors from the group comprising adenovirus, adeno associated virus, lentivirus and plasmids.
8. A method of using the sequence of claim 5 in gene therapy applications to treat muscle disorders.
9. A method of using the sequence of claim 5 in gene therapy applications to treat muscular dystrophy.
10. A method of using the sequence of claim 5 in gene therapy applications to treat Duchenne Muscular Dystrophy.
11. A method of using the microtrophin molecule of claim 6 to treat muscle disorders.
12. A method of using the microtrophin molecule of claim 6 to treat muscular dystrophy.
13. A method of using the microtrophin molecule of claim 6 to treat Duchenne Muscular Dystrophy.
14. A nucleotide sequence that is at least 50% homologous to the nucleotide sequence of claim 5.
15. A polypeptide sequence that is at least 50% homologous to the polypeptide sequence of claim 6.